

State of New Hampshire

Banking Department 64B Old Suncook Rd

Concord, NH 03301

Telephone: (603) 271-3561 Fax: (603) 271-0750 www.state.nh.us/banking

REPORT OF MORTGAGE ORIGINATORS

NO FEE						
Check one: Date of this filing:	_Initial Report	Update informati	on (highlight or o	otherwise mark	the changes)	
	1	NAME AND IDENTIFICAT	TION OF LICEN	ISEE .		
1. Legal name of	licensee:					
2. Applicant's fee	leral tax ID numb	er:				
3. Name and telephone number of person completing this form:						No.)
ELECTRONICALLY. below to provide a list of your company. Include originator's Social Secu	Please see our we of all individuals, veach person's first rity Number and l	COMPLETE THIS FORM. bisite at www.state.nh.us/banlwherever located, who will or an ame, last name, middle inipusiness telephone number; at	king for the electroniginate, make or be tial and any suffix tach an additional	onic format. Other proker New Hamp t, business addres I sheet if necessar	erwise, fill out the oshire mortgage is, last 4 digits of ry:	ne form loans for f the
Full name of originator	r Bu	isiness address of Originator	Last 4 digits of Social Security Number	Telephone no. of Originator	Start Date	End Date